Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEETRANSMITTAL

For FY 2005

Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 120

Attorney Docket No. 24-007

METHOD OF PAYMENT (check all that apply)

Check None

Other (please identify):

	,							
TOTAL AMOUNT OF PAYN	MENT	(\$) 120		Attorn	ey Docket No.	24-007		
METHOD OF PAYMENT (check all that apply)								
☐ Check ☐ None ☐ Other (please identify):								
√ Deposit Account D	Deposit Account Deposit Account Number. 50-1147 Deposit Account Name: Posz Law Group, PLC							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments								
FEE CALCULATION								
1. BASIC FILING, SEARCH					EVARABLATIC	ON FEE		
	FILING FE Sn	ES nall Entity	SEARCH S	FEES mall Entity	EXAMINATIO Sm	all Entity		
Application Type		ee (\$)		Fee (\$)		Fee (\$)	<u>Fees</u>	Paid (\$)
Utility	300	150	500	250	200	100		\$
Design	200	100	100	50	130	65		<u>.</u>
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	160	80	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description Fee (\$)								
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 52 53 54 55 55 50 50 50 50 50 50 50								
Multiple dependent claims	ii 3 0i, ioi res	sues, each inci	spendent dan	irrinoic trairint	ne original paterit		360	180
Total Claims	Extra Claims	Fee	(\$)	Fee Paid (\$)	!	Multiple Depend		
- 20 or HP =		_ x	= .			<u>Fee (\$)</u>	Fee Paid (<u>\$)</u>
HP = highest number of total clair								
Indep. Claims	Extra Claims	<u>Fee</u>		Fee Paid (\$)				
- 3 or HP = HP = highest number of indepen	dont daims paid	X for if amater than	 = .					
3. APPLICATION SIZE FEE		ior, ir greater than						
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ (\$ for small entity)								
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Shee	_	umber of eac		O or fraction there		_ <u>F</u>	ee Paid (\$)
- 100 =	·	/50=		_ (round up to	a whole number)	×		Food Baid(\$)
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)								
Other: Petition for Extension of Time (1 month)								
SUBMITTED BY								
		1/1/	Rec	sistration No) 707 0440

SUBMITTED BY Signature	Casta Nich	Registration No. (Attorney/Agent) 36,880	Telephone	(703) 707-9110
Name (Print/Type)	Cynthia K. Nicholson		Date	23 March 2006

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Docket Number (Optional) 24-007								
	In re Application of	Katoh et al.						
PE WO								
O	Application Number 10/612,087		Filed: 7/3/2003					
23 Julio E	For LAMINATE SHE	For: LAMINATE SHEET, LAMINATE SHEET ROLL, AND PRODUCING						
MAIN	METHODS THEREFOR							
TOTA TRADE	Group Art Unit	MAD						
	1772							
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.								
The requested extension and appropriate n		is follows						
(check time period desired):	•							
One month (37 CFR 1.17(a)(1))		\$120.00						
Two months (37 CFR 1.17(a)(2))		\$ <u>450.00</u>						
Three months (37 CFR 1.17(a)(3))		\$ <u>1020.00</u>						
Four months (37 CFR 1.17(a)(4))		\$1,590.00						
Five months (37 CFR 1.17(a)(5)) \$2160.00								
* '	Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount							
shown above is reduced by one-half, and the resulting fee is: \$								
A small entity statement under 37 CFR 1.2	, .							
is enclosed.								
has already been filed	has already been filed in this application.							
A check in the amount of the fee is e								
The Director has already been authorized to charge fees in this								
application to a Deposit Account.								
The Director is hereby authorized to charge any fees which may								
be required, or credit any overpayment, to Deposit Account								
Number I have enclosed a duplicate copy of this sheet.								
I am the assignee of record	of the entire interest.							
applicant.								
attorney or agent of record.								
attorney or agent under 37 CFR 1.34(a).								
Registration number if acting under 37 CFR 1.34(a).								
		(SH) N						
Date 23 March 2006 Signature								
	Cynthia K. Nicholson(Reg. No.36,880)							
Typed or printed name								

03/24/2006 HALI11 00000184 10612087

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